DOCUMENT # P99000105470 1. Entity Name					FILED		
CAPITAL REAL ESTATE, INC.					00 JUN 23 AM 7: 37		
Principal Place of Business 0795 FAIRMONT VILLAGE DRIVE AXE WORTH FL 33467		Mailing Address 10795 FAIRMONT VILLAGE DRIVE LAKE WORTH FL 33467			SECRETARY OF STATE TALLAHASSEE, FLORIDA		
2. Principal Place of Business		3, Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State		City & State			4. FEI Number Applied For Not Applicable		
Zip	Country	Zip	Country		5. Certificate of Status Desired \$8.75 Additional Fee Required		
	6. Name and Address of Current R	t Registered Agent			7. Name and Address of New Registered Agent		
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				Name	e		
LEVINE, HARRY A 10795 FAIRMONT VILLAGE DRIVE LAKE WORTH FL 33467			Street Address (P.O. Box Number is Not Acceptable)				
			City	FL Zip Code			
8. The above nar	med entity submits this statement for	the purpose of changing	its register	red office or registe	ered agent, or both, in the State of Florida.		
SIGNATURE	nature, typed or printed name of registered agent ar	d title if applicable. (i	NOTE. Register	ed Agent signature require	od when reinstating) DATE		
9. This corporati	FILE NO	W!!! FEE	IS \$150.00	10. Election Campaign Financing \$5.00 May Be			

After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Delete TITLE TITLE LEVINE, HARRY A NAME 10795 FAIRMONT VILLAGE DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE WORTH FL 33467 CITY-ST-ZIP Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-12-00 Date

561 967 2026 Daytime Phone #

6-12-00 FLORIDA Dept. State Div. of Corp. POBOX 1500

Tallahassee, FL. 32302

Re: Late Filing for Capital Real Estate INC.

Capital Real Estate was incorporaTED in Florida during

Dec. 1999 from a New York Status previously.

Due to a progression of 3 very serious medical situations, during the past 6 months, this filing and a number of others went unattended.

As I am retired and as Capitan has Small minimum passive investments there was no reminder or awarness on my part of the need to file or the timing of a filing.

After finding this form in my brawer yesterday I ralled your department, the person suggested I send this letter of explanation along with the Ciling fee of 150. It trust you will not have to impose a late ipenalty.

You'r Courtesy and attention would be most approxiated.

Yours frult,